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## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\* *9/16/04*

This application is a CIP of 10/171,202 08/26/2002 ABN

\*\* FOREIGN APPLICATIONS \*\*\*\*\* *9/16/04*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

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Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>9-16-04</i> Examiner's Signature Initials	STATE OR COUNTRY NC	SHEETS DRAWING 6	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 3
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## TITLE

Personal floatation device

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